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Company: USPTO 2800	From: Wendy W. Koba
Attention: Leon Scott Jr.	Pages including cover sheet: 9
Fax No.: 703-872-9306	Date: 12/19/03
Re: Serial No. 09/668,675	
<input type="checkbox"/> Urgent <input type="checkbox"/> Please review <input type="checkbox"/> Please Comment <input type="checkbox"/> Please Reply <input type="checkbox"/> For your information	

Case Name:	Ackerman 27-15-1-13-11-2
Serial Number:	09/668,675
Filing Date:	September 22, 2000
Group Art Unit:	2828
Title:	Aging in Tunable Semiconductor Lasers

In response to an Interview Summary dated November 19, 2003 attached please find the following documents:

1. Transmittal Form (1 page)
2. Certificate of Facsimile Transmission under 37 CFR 1.8 (1 page)
3. Amendment (6 pages)

Respectfully submitted,

Wendy W. Koba

Wendy W. Koba, Esq.

PTO/SB/07 06-03

Approved for use through 07/31/2006. OMB 0651-0032

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Amendment for App. No. 09/668,675

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TRANSMITTAL
FORM

(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/668,675
Filing Date	Sept. 22, 2000
First Named Inventor	D. A. Ackerman
Art Unit	2828
Examiner Name	Leon Scott Jr.
Attorney Docket Number	27-15-1-13-11-2

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<i>37 CFR 1.8</i>
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual name	<i>Wendy W. Koba</i>
Signature	<i>Wendy W. Koba</i>
Date	<i>12/19/03</i>

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Signature	<i>Wendy W. Koba</i>
	Date <i>12/19/03</i>

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